

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant(s): Boyce et al.

Examiner: Pellegrino, Brian E.

Serial No.:

09/610.026

Group: Art Unit 3738

Filed:

July 3, 2000

Docket: 285-118

For:

OSTEOGENIC IMPLANTS DERIVED FROM BONE

Dated: February 12, 2003

Assistant Commissioner for Patents

Washington, D.C. 20231

BOX RCE

TECHNOLOGY CENTER R3700

AMENDMENT TRANSMITTAL FORM

Sir:

Transmitted herewith is an amendment in the above-identified application.

- [X] Small entity status of this application under 37 C.F.R. §§1.9 and 1.27 has been established.
- [] A verified statement to establish small entity under 37 C.F.R. §§1.9 and 1.27 is enclosed.
- [] No additional fee is required.

| For | Claims Remaining After Amendment | Highest No. Previously Paid For | Present Extra | Rate (Small Entity) | Addit. Fee | Rate | Addit. Fee |
|---|-------------------------------------|---------------------------------------|------------------|---------------------------|---------------|--------|---------------|
| TOTAL CLAIMS | 44 | 40 | 4 | x 9 = | \$36 | x 18 = | \$0 |
| INDEPENDENT CLAIMS | 3 | 3 | 0 | x 42 = | \$0 | x 84 = | \$0 |
| [] First Presentation of Multiple Dep. Claim | | | | 140 | | 280 | \$0 |

CERTIFICATION UNDER 37 C.F.R. §1.10

I hereby certify that this correspondence and the documents referred to as enclosed are being deposited with the United States Postal Service on date below in an envelope as "Express Mail Post Office to Addressee" Mail Label Number EV176144458US addressed to: Assistant Commissioner for Patents, Box RCE, Washington, D.C. 20231. R. Bew

Dated: February 12, 2003

Michael R. Brew

^{*} If the entry in Col. 1 is less than entry in Col. 2, write "0" in Col. 3.

** If the "Highest No. Previously Paid for" IN THIS SPACE is less than 20, enter "20".

*** If the "Highest No. Previously Paid For" IN THIS SPACE is less than 3, enter "3".

The Highest No. Previously Paid For" (Total or indep.) is the highest number found in the appropriate box in Col. 1 of a prior amendment or the number of claims originally filed.

- [] Please charge Deposit Account No. <u>04-1121</u> in the amount of \$___. Two (2) copies of this sheet are enclosed.
- [X] A check in the amount of \$36.00 is enclosed.
- [X] Please charge any deficiency as well as any other fee(s) which may become due under 37 C.F.R. §§1.16 and/or 1.17 at any time during the pendency of this application, or credit any overpayment of such fee(s) to Deposit Account No. 04-1121. Also, in the event any extensions of time for responding are required for the pending application(s), please treat this paper as a petition to extend the time as required and charge Deposit Account No. 04-1121 therefor. TWO (2) COPIES OF THIS SHEET ARE ENCLOSED.

DILWORTH & BARRESE, LLP 333 Earle Ovington Blvd. Uniondale, NY 11553 (516) 228-8484 Respectfully submitted,

Peter G. Dilworth Reg No. 26,450

Attorney for Applicant(s)

PGD/MRB:mg